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GOVERNOR

STATE OF MAINE
DEPARTMENT OF HEALTH AND HUMAN SERVICES

BREAND M. HARVEY
COMMISSIONER

Instruction for DHHS Children's Referral for MaineCare Section 13.12 Target Case Management

Referral Date: This space is to record the date of when a service has been identified or requested for treatment intervention. This will be the date used on the Monthly Status Report identified as the Referral Date.

Referral Source/Relationship: Identify the person making the request and their relationship to the child.

Contact Information: Record the name, title, and contact information of the person who is completing this form.

Demographic Data: Complete this section as accurately and thoroughly as possible. It is essential that names be spelled correctly and as they appear on the MaineCare card. **Race:** the Federal government requires this question but it is optional. Provide the address of the child. This is the address where this child is currently residing and where the child is able to receive service.

Guardianship/Custody: Complete this section identifying the current legal guardian(s) or if the child is in state custody (this applies to Child WelfareV9 statuses for young adults). In the event there is a guardian/custody issue evidence of the current guardian/custody agreement may be requested. Indicate if one parent assumes the rights and responsibilities' of a child solely or if the rights and responsibilities' of the child are shared between two parents. Indicate self-guardianship for the referral of an emancipated child or young adult of 18, unless not permitted.

Written diagnosis and number code: A child's written diagnosis and corresponding number code are to be documented on the appropriate Axis's I Axis's II. A complete listing of diagnosis's can be located in the DSM IV-R.

Disability Category: Choose all disability categories that a child may be eligible for based on the diagnostic evaluation. If the child has Mental Retardation, Autism, or PDD-NOS, the disability category will be MR/Autism. If the child has Asperger's or any other Mental Health diagnosis, the category will be MH. Children to age six without one of the above diagnosis will be classified as EI/DD. If the child has co-occurring disorders indicate by checking all category boxes that apply.